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FACSIMILE COVER SHEET

TO:	Examiner Tung T. Vo U. S. Patent & Trademark Office Group Art Unit 2613		
FROM:	Carole A. Quinn, Reg. No. 39,000		
RE:	U.S. Application No. 09/503,476 Atty. Docket No. 00862.021824		
FAX NO.:	(703) 872-9306		
DATE:	March 29, 2005	NO. OF PAGES:	15
		<small>(including cover page)</small>	
TIME:	6:00 P.M.	SENT BY:	LS

MESSAGE

Attachments:

- 1) Amendment Transmittal
- 2) Amendment

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In re Application of:

Docket No. 00862.021824.

HIROSHI TOJO

Application No.: 09/503,476

Examiner: Tung T. Vo

Filed: February 14, 2000

Group Art Unit: 2613

For: IMAGE PROCESSING APPARATUS
AND METHOD, AND COMPUTER-
READABLE MEMORY

Date: March 29, 2005

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	** 20	= 0	x \$25 \$50	\$0
INDEP. CLAIMS	* 6	MINUS	*** 6	= 0	x \$100 \$200	\$0
Fee for Multiple Dependent claims \$180°/\$360						previously paid
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						\$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Carole A. Quinn
Attorney for Applicant
Registration No.: 39,000

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Form #120

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Page 2 of 2

00862.021824.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

HIROSHI TOJO

Application No.: 09/503,476

Filed: February 14, 2000

**For: IMAGE PROCESSING
APPARATUS AND METHOD,
AND COMPUTER-READABLE
MEMORY**

)
: Examiner: Tung T. Vo

: Group Art Unit: 2613

: March 29, 2005

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**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

AMENDMENT

Sir:

In response to the Office Action dated December 29, 2004, please amend the above-identified application, as follows:

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March 29, 2005

Date _____

Signature

Carole A. Quinn, Reg. No. 39,000
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